A Struggle With Obesity – My Personal Story (An article detailing my personal experience with obesity and my decision to undergo Gastric Bypass Surgery [GBS])

By Connie F. Lewis

I have worked at the VA National Center for Health Promotion and Disease Prevention (NCP) for the past seven years. For the past two years, our mission has been to address the issues of overweight/obesity among our veteran population. Somehow, it proved to be a contradiction for me. How in the world can I work for an organization that promotes healthy behaviors, in particular, encourages healthy eating and proper exercise when I was the poster child for obesity?

Overall, our staff tries to walk the talk. Many of them eat healthy and exercise on a regular basis. My exercise consisted of walking out to my vehicle to go eat at any number of fast food restaurants in the area. Of course, I exercised my mouth – by stuffing it with food and chewing, no gulping down my lunch. After finishing my lunch, I would get back in my vehicle, return to work and fight to stay awake for the rest of the afternoon because I had eaten too much for lunch and was sluggish. This was pretty much my routine for all meals. I hate the thought of cooking, although I am a pretty good cook. It is much easier and convenient to eat out, and I enjoyed eating out. Eating out is a social thing for me. My friends will call and invite me to go out to eat. Because I enjoy eating, I never turned down an invitation to eat out. The one thing about my friends – they really do care for me. In the back of their mind, they are thinking that I really need to lose weight, however, they don't realize their contribution to my weight problem by always inviting me to eat out. And keep in mind that these same friends are not struggling with their weight! Yes, we all can learn how to eat healthy at any weight, but it is interesting that the people I break bread with are not the fat people. I, however, have the weight problem. Instead of kindly turning them down or even making wise food choices at these restaurants, I eat what they eat and wham, the pounds pack on and before realizing it, the weight has gotten way out of control.

I should not be too critical of myself. I have attempted on any number of occasions to lose weight by healthy eating and regular exercise. On at least two occasions, I've had substantial weight loss by following the Weight Watchers Program. But I am sure you



This is me in October 2003 for our NCP group photo – one of my last pictures taken prior to surgery

know the rest of this story — the weight came back. I have been battling my weight for most of my life. I started gaining weight around 11 years old, but I grew up at a time when a few pounds was considered "baby fat" and eventually you will lose the weight when you got older. Well, I never lost the "baby fat" and I grew from a fat teen to a fat adult. I have dealt with a few inconsiderate family members and acquaintances, but for the most part I was not hassled about my weight. My parents were always concerned about my weight, but never made me feel inferior because I was overweight. My weight never prevented me from establishing relationships, enjoying hobbies or even gaining employment. At first, my weight did not even affect my health. But that soon changed.

I have a family history of colorectal cancer, hypertension, arthritis and diabetes. Until I turned 34, I was able to escape these conditions – always receiving a clean bill of health from my primary care physician. However, I would get the warning that I needed to lose weight before these conditions developed. I did not heed the warning – I was diagnosed with hypertension at age 34. Over the next $6\frac{1}{2}$ years, I was taking two medications for hypertension. My blood/sugar count

was slowly climbing, which was an indication that I would face the possibility of developing diabetes. My body ached all of the time. It would take me at least 10 minutes to get out of bed every morning because my joints would be so stiff. I lived on Motrin 800 and was taking up to three tablets a day.

Mundane tasks were becoming difficult for me – cleaning my house, walking up stairs, walking from my vehicle to a grocery or department store. Traveling was becoming tiresome and dreadful

for me — a five-hour car ride to Washington DC to visit my parents was torture; an airplane ride was too confining, in addition to the problem of not being able to fit comfortably in the seats. My last plane ride (August 2003) was very humiliating for me because I had to get a seat belt extension because I was too large to fasten the seat belt across my hips. Walking through the airport to get to the gate was another chore for me.

I was getting discouraged about my increasing weight gain, but was not making the effort to address the issue. For two decades, I had made attempts to lose weight, trying every diet on the market — Weight Watchers, Atkins, Grapefruit, Slim Fast, Starvation, Jenny Craig. I even had my physician write up a prescription for Xenical. I decided that I was not going to be fat for the rest of my days and I needed to get a handle of this weight issue. About a year ago, I started investigating the possibility of GBS. I first



This picture was taken in 1999 – I was at my heaviest weight. After getting over the initial shock about how I looked, I decided to join Weight Watchers

discussed my consideration of this procedure with my director, Dr. Steve Yevich. I wanted to find out from him what his thoughts were and whether I should consider having this procedure. He spoke very candidly with me; he was very concerned with my health and thought that this was an option, but had its risks. He offered his full support in any decision I made. In addition, I did a lot of on-line research, and talked with several individuals who had the procedure. I was able to get honest feedback regarding the benefits and risks involved in undertaking this procedure. I attended my first bariatric seminar in September 2003 and was able to meet with the surgeon who would perform the procedure. Any questions and concerns that I had were addressed, and all participants were given a package of materials to complete if they were interested in considering bariatric surgery.

It was at this time that I knew bariatric surgery was the way to go. The benefits certainly outweighed the risks and I knew that if I was ever going to start feeling better and reclaiming my health, I had no options. I made my decision – I wanted to be considered for bariatric surgery.

As previously mentioned, I have struggled with obesity for all of my teen and adult life. Throughout my life, I tried diet after diet without any long-term success. After developing a series of health problems and soon approaching 40 years old, I finally came to the decision to reclaim my health and my life. In the summer of 2003, I started to explore the possibility of bariatric surgery. The thought really scared me to death — I've always heard negative reports about this procedure. Even when celebrities like Carnie Wilson "popularized" GBS, I thought it to be an extreme case of a celebrity wanting a quick fix to her weight problem. I never think of celebrities being real people facing normal, day-to-day problems like everyone else.

Anyway, I thought I would do some research about GBS on my own. I needed to have an unbiased approach to this surgery; I researched information on the internet and read all the literature that I could find. Most importantly, I was able to interact with people who had undergone the procedure. The first person I talked with is a personal friend of my aunt. She had

undergone GBS in March 2003. When I first heard that she was scheduled for this procedure, I thought she was crazy for even thinking about doing this to herself. However, when I saw her in July 2003, I could not believe the transformation she had gone through, not to mention that she was feeling absolutely wonderful! I was then curious to find out if she had any regrets about proceeding with the surgery. She warned me to seriously think about what I was thinking of doing, as she refused to endorse this surgery for anyone other than herself. She decided that it was the right thing for her to do. My friend was very open and honest about everything involving the procedure, including a couple of minor complications that occurred post- surgery. Overall, the procedure was a success and she has greatly benefited. I was given the name and telephone number of the surgeon who performed the procedure, and thanked her for her input.



This picture was taken 3-1/2 months post surgery (57 pound weight loss)

In August 2003, I contacted the surgeon's office to schedule an appointment. I was told that I needed to attend a 2-hour bariatric seminar before scheduling an office appointment. The office scheduled me to attend the seminar in late September 2003.

The surgeon conducted a slide presentation and discourse about bariatric surgery. He provided statistics on the number of overweight/obese adults in our country and the health problems associated with overweight/obesity; provided a step-by-step guide to bariatric surgery; summarized the benefits and risks involved in performing bariatric surgery; discussed several surgery options, including the Lap Band and Roux-en-Y Gastric Bypass; and allowed many of his patients to share their experiences as a result of having bariatric surgery.

After listening intently, I decided that I wanted to be considered for bariatric surgery. At the seminar, a package of materials was provided that were to be filled out and returned to the surgeon's

office. The materials were many pages of medical history that would help determine if a person was qualified for this procedure. I immediately completed the forms and mailed them back to the office. In two weeks' time, the office contacted me for my first appointment.

Outright, I was impressed with the surgeon and his staff. They were very kind and expressed genuine concern for my health. The initial consultation went very well; the surgeon told me that he wanted to "fix me up" and he was prepared to do everything he needed to make that possible. After agreeing to perform the surgery, he indicated that it was now time to convince the insurance company that it was medically necessary for me to have this surgery. For the next 2 months or so, I had to take every type of medical test. I had a bone density test; endoscopy; thyroid panel; ultrasound to check kidneys, liver, pancreas; EKG and echocardiogram; blood gas; the testing was endless. I also needed a psychological examination performed to determine if I was able to cope with changes, both physically and emotionally following the surgery. A few of these tests were performed in order to gain approval from the insurance company. In addition, I had to provide the insurance company with a weight history for the past 6 years, including any attempts at losing weight (such as my Weight Watchers records or doctor-supervised programs). This information was submitted to the insurance company. In two days, the insurance company approved my surgery. This was in November 2003. I was scheduled for surgery on January 26, 2004.

Initially, I chose not to share my news with anyone other than my immediate family, the NCP Director and my immediate supervisor. I was afraid that people would try to talk me out of going through with the surgery. I just was not prepared to receive any negative feedback from well-meaning people or with someone intruding into my personal life.

Two weeks before surgery, my doctor suggested that I start on an all-protein diet in order to shrink my liver — he was planning for a laparoscopic procedure. If the liver were enlarged, he would have to perform an open procedure. He also ordered blood tests to ensure that all was well.

When the blood work came back, it showed I had a bladder infection, so I had to start on antibiotics for the infection to clear before surgery. In addition, the local weather channels were predicting icy conditions for the weekend before the Monday of my surgery. My mother arrived from out of town to accompany me and we decided that we would leave early Sunday to avoid any hazardous road conditions due to inclement weather. We checked into a hotel approximately three miles from the hospital. Of course, the roads were very icy and the weather was very treacherous for the rest of the evening. The fact that I had to take a laxative and spend the better portion of the night in the bathroom did not make that evening any more pleasant, not to mention that I was very nervous about the surgery.

I was to report to the hospital Monday morning at 7:30 am for an 11:00 am operation. The hospital called late Sunday night to inform me that there would be a two-hour delay because of weather conditions. I was to now report to the hospital at 9:30 am. I arrived at the hospital a little before 9:30, changed clothes, and had my vitals and history checked. I was rolled into the prep room and hooked up to the IV. Again, my vitals were taken. My surgeon came in about ½ hour later and realized that he needed to take another blood test to insure that my infection had cleared. The tests confirmed that my infection had cleared, but another problem had developed. My hemoglobin had dropped! In earlier discussions with my surgeon, I expressed to him that because of religious beliefs I would not consider a blood transfusion. He supported my decision 100%. However, when my hemoglobin dropped, he was unwilling to jeopardize my life in the event that I would have complications during surgery. It was his suggestion—no his insistence—that I would wait to have the surgery when my blood count was elevated. Just imagine the disappointment I felt, but I knew the most practical and safest option was to wait.

During the 2-month waiting period, my hemoglobin significantly elevated and my doctor was able to reschedule surgery for April 12, 2004.

I find it hard to believe that, one year ago on April 12th, I had gastric bypass surgery! It's been a year of both physical and emotional changes.

I often reflect on what my life was like before that pivotal date — unhappy, miserable, and suffering greatly. I'm almost 42 years old, and I feel like I am in my 20's. Before the surgery, I felt like I was 70 or older. Truthfully, many 70 year-old people felt better than I did. My point is this: carrying around large amounts of extra weight ain't a good thing! I've seen television talk shows that featured persons who've lost lots of weight, and these persons are charged with attempting to lug around the amount of weight that they lost. It's unbelievable that any person can carry an extra 20, 30, 50, 75 or 100 pounds of extra weight on the body. Well, I lugged around 100+ pounds of body fat. No wonder I experienced back and joint pain. My heart and other organs were working overtime, all of the time. I was a heart attack/stroke waiting to happen, and the onset of diabetes was imminent. I was too young to become another casualty of the "weight war," another statistic for weight-related deaths. I don't even want to be counted in the high percentage of obese Americans.

As I mentioned, I have undergone physical changes - obviously. I used to wear sizes 26-28. I currently wear sizes 12-14. I do not remember the last time I tried on a garment that was a 12 or 14 – yeah I do, when I was in 7^{th} grade. I'm having the best of times shopping for clothes. It is no longer a chore, and it is no longer daunting for me to try on clothes. The best part is that I can actually buy clothes that are attractive and appealing to me. Although retailers are now realizing that full-figured women want to look nice, those clothes are more expensive and some styles of clothing do not fit most figures of big women. Full-figure models wear sizes 12-18, and those clothes do not look the same on a woman who wears a size 26 or 28. I feel that any woman has the right to wear what feels comfortable for her; however, there were certain styles not becoming on me – just couldn't pull it off in a size 26/28. Now, I feel comfortable having various styles of clothing in my wardrobe.

One concern that bariatric patients have is the amounts of excess skin due to rapid weight loss. With clothes on, I look great. With clothes off, I see the reminder of the fact that I carried around over 100 pounds of body fat. Although it's cosmetics, I wonder if I will consider having the excess skin removed. I haven't reached a point where it really bothers me, and I still have a few more pounds to lose, so it's possible that one day I will decide to complete my transformation (I may decide to wear a bikini on my next big vacation).

It's great that I can talk about the nice clothes/smaller sizes I now wear, but the foremost reason why I had weight loss surgery is to obtain a measure of good health! That is the most significant

and meaningful physical change I have undergone. I no longer complain about aches and pains related to my weight, my blood pressure is excellent (I am taking one medication for hypertension, instead of two), my blood sugar is low (I have a family history of diabetes, but I have confidence that my weight reduction has lowered my chances of developing diabetes). My energy level is high; I do not tire easily and no longer require 7-8 hours of sleep to function. I no longer suffer from heartburn, ulcers or other stomach irritations. My overall health has improved a lot. On a scale of 1-10, I give it an 8.5.

Bariatric patients must consume large amounts of dietary supplements to replace the lost nutrients they no longer receive in food. Personally, I have trouble following this regimen; however, it is one of the most important aspects of weight loss surgery. I MUST take the supplements to avoid future complications resulting from nutrient deficiencies. I am required to take supplements designed for bariatric patients: calcium (6 capsules), multivitamins (3 capsules), iron (1 tablet) and biotin (3 tablets) each and every day. I'd rather take dietary supplements than insulin for diabetes or medications for heart disease or hypertension. In comparison, it's a small price to pay!

From an emotional aspect, my weight loss has certainly given me great confidence — I exude confidence, and others notice it. In the past, my weight never prevented me from establishing relationships, enjoying hobbies or even gaining employment. However, I do realize that during some periods in my life, I was judged unfairly because of my weight. Unfortunately, society in general does not look favorably upon obese people and they are viewed as lazy, stupid and out-of-control. While my weight was out-of-control, I am neither lazy nor stupid. There was also the tendency for people to talk AT ME, instead of TO ME. I find it very insulting and demeaning; I promise that it's okay to look me in the eye and have a conversation with me — I don't bite and my being fat is not contagious ...

It has been very interesting to see the reactions of people whom I have not seen in a while. In almost every case, the person did not recognize me (many of these people are long-time friends/acquaintances and family members). Even people who heard that I lost weight did not envision that I lost a lot of weight. For several people, I think I may have brought on a coronary attack! These reactions are very flattering and satisfying. They help reinforce the fact that I have made quite an accomplishment and I should feel proud of my success.

While gathering my thoughts for this concluding article, I contemplated about what message I wanted to relay - I am a very private, secluded person, so why did I decide to turn my private, secluded life into a very public affair? I shared my personal experience because I represent the high percentage of Americans who suffer from obesity. I'm not a physician, nurse, dietitian or any other clinician charged with counseling obese patients to lose weight. I AM that patient, a real live person who struggles with obesity. I strongly feel that true empathy AND sympathy can only come from persons who have the same issues and life experiences as you do. Who better can counsel a person about the benefits of weight loss than someone who has struggled with obesity and has lost weight? People who do not have weight problems cannot begin to understand a person struggling with obesity. I find that some health care professionals tend to be very critical and unsympathetic. No, it's not as simple as "back away from the table," "you can control what goes in your mouth," "if you would just take a 10-minute walk, it will make a difference," "you're

going to die if you don't lose weight." PLEASE!!! If it was that easy, I would not have a weight problem in the first place! My greatest inspiration comes from those who lost weight and maintained their weight loss.

For me, the battle with obesity continues. It is argued that obesity is a disease – diseases become dormant, sometimes indefinitely. I want to say that my condition is dormant. I still have another few pounds to lose, but I always keep in the back of my mind that ONLY proper diet and exercise are fundamental to long-term weight loss. One year later, I still have to carefully watch my food intake – not eating too much, too fast. I avoid eating foods that are too sugary/greasy. I've cut

back on the amount of carbohydrates I consume during the day and eat mainly proteins, fruits and vegetables. There are times when I crave the cookies, candy and chips and indulge more than I But I quickly should. rebound and jump right back into my newfound lifestyle of proper eating. It's also important that I drink plenty of water. I'm fan of exercise: no truthfully, **HATE** Ι exercise! I have to force myself to get in the exercise at least 4 days a week for 30-45 minutes. Improvement in this area is needed.



June 2005 - 115 pound weight loss

Weight loss surgery is available for those who can benefit from it; however, it is not the quick fix to weight loss. I AM NOT an advocate for weight loss surgery; it was a personal choice that I made in order to help me achieve weight loss. It took me almost a year of on-line research and talking with other bariatric patients to make such a weighty (no pun intended) decision that would affect the rest of my life. I was having major surgery, which comes with risks, possibly death. While bariatric surgery was a key to my weight loss, my condition can and will reoccur if I am not following a proper diet and exercise program. Whatever method a person chooses to achieve weight loss will only work through proper diet and exercise.

I'm sooooo happy with my success – what a year!

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